



Testimony regarding the State of Illinois 1115 waiver application to the federal government

Illinois House of Representatives Committee on Appropriations – Human Services

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Thank you for your service to our state during these important times in our state's history. We appreciate your time and attention to our testimony today and for all of the efforts to invest in making wise decisions on behalf of the people of our state.

Chicago Commons is a 119-year-old social service agency that operates and serves families who are most at risk in neighborhoods including West Humboldt Park, Pilsen, Back of the Yards, and Grand Boulevard. We provide early childhood education, after school programs, adult continuing education courses, and home and day care for our seniors. I am honored to have been recently chosen by the board to serve as its executive director. You may find more at www.chicagocommons.org or by calling me directly at (773) 826-3793.

One of our important missions is to care for the frail elderly through the Community Care Program operated in cooperation with the Illinois Department on Aging. We help keep people in their homes and help support and preserve their quality of life which they and their families prefer over a more institutional setting. This is a highly successful approach which is superior for the seniors and their families, saves the state and its taxpayers the additional cost of institutional care, and has been hailed nationally as a successful model.

Given that, we were concerned by language in the draft application (Page 52, V. X. Appendices / Homemaker) which if implemented would shatter the system of agency-provider care which has been essential to achieving the salutary goals and outcomes of this program.

It would also, I wish to point out to you the members of these House Committees, upend most if not all of the good work, which you accomplished in conjunction with all of the stakeholders in Illinois senior care when you passed H.B. 2275 in 2013. That legislation implemented important changes to the program, including practices such as electronic visit verification (EVV), which stabilized funding for the program and continued our combined efforts to ensure quality care, safety, comfort, and quality of life for our clients, your constituents.

The key language in the draft is as referred to on Page 52 of the draft:

Services will consist of general household activities (meal preparation and routine household care) and personal care provided by a trained homemaker; when the individual regularly responsible for these activities is unable to manage the home care for him or herself and is unable to manage a personal

assistant. This service will only be provided if personal care services are not available or are insufficient to meet the care plan or the consumer cannot manage a personal assistant. Homemakers shall meet such standards of education and training as are established by the State for the provision of these activities.

This service will only be provided if personal care services are not available or are insufficient to meet the care plan or the consumer cannot manage a personal assistant. The amount, duration, and scope of services will be based on need and service cost maximum level as approved by the OA.

Service is limited by the service cost maximum, except for transport. There is a maximum of 100 hours per month.

While we acknowledge the consultants have discussed this language with us and other CCP providers, and that new language is being circulated, this approach was alarming to us and we believe it should be to you as well.

The CCP works because agencies such as Chicago Commons invest considerable time, effort and expertise into training home-care workers, and by supporting and supervising their service to their senior clients. This approach is much different from the “personal assistant” model which is used more ordinarily in the working relationship between a physically disabled individual and their care-giver.

Compared to the frail senior, a younger adult who works with an individual care-giver is likely more actively engaged in the community, is perhaps working and still has the cognitive skills to manage and direct the care of a personal attendant. We know this is a valued model for physically disabled adults and we appreciate their interest in preserving that relationship.

That is not the right model for the senior population which we serve in the CCP. Agency-directed care is preferable over the “personal assistant” model for this population for many reasons. If adopted, the approach outlined by the draft application would put some 80,000 Illinois seniors into an uncertain environment of having to locate, hire, supervise, and in so many other ways manage a professional and financial relationship which we believe is beyond their ordinary ability to successfully accomplish.

Agency-directed care is still a consumer-based model which provides significant choice for the recipient of the care. Seniors and their families may choose from providers who are not-for-profit, which serve persons of their language or cultural heritage, and are local companies or they may choose large providers with locations in virtually every county in the state. They know that when they choose to work with us at Chicago Commons or with other CCP providers, the individual coming to their home has had a background check and is trained, supervised, is paid a decent wage with benefits, and that if they have ANY problem with that relationship, it is handled with a single phone call. They do not need to take on the role of employer at this stage in their life.

There are many strengths to the PA system – it just isn’t the right approach for the CCP.